

STATE OF ARKANSAS **Department of Pollution Control and Ecology** P. O. Box 8913 Little Rock, Arkansas 72219-8913 Telephone 501-562-7444

Form Approved. OMB No. 2050-0039. Expires 9-30 (Form designed for use on elite (12-pitch) typewriter.) Please print or type. Information in the shaded areas **UNIFORM HAZARDOUS** required by Federal law. CIAIDI018161511101010151912101119 WASTE MANIFEST A. State Manifest Document Number 3. Generator's Name and Mailing Address Douglas Aircraft Company Attn: R. Tuell M/S C6-59 533655 19503 S. Normandie Avenue, Torrance, CA 90502)533-7926 or (310) 533-7231 4. Generator's Phone (310 HAH036005698 -5. Transporter 1 Company Name United Pumping Service <u>DO 17 12 19 15 13 17 17</u> 7. Transporter 2 Company Name F. Transporter's Phone 9. Designated Facility Name and Site Address G. State Facility's ID Ensco, Inc. American Oil Road H. Facility's Phone El Dorado, AR 71730 IA IR ID IO I6 I9 I7 I4 I8 I1 I9 I2 (501) 863-7173 Total Quantity 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) Type Waste No. *RQ, Waste, Oxidizer, Corrosive Solid, N.O.S. (Potassium Nitrate, Potassium Hydroxide) 714191n 1 F10151510101 Oxidizer, NA9194 (D001,D002) 0001.0002Non-RCRA Hazardous Waste Solid N/R 01/18101M0140019 RQ, Waste, Paint Related Material 0001,F002 Flammable Liquid, NA1263 (D001) 003,F005 0212101M/1/000 RQ, Waste, Flammable Liquid, N.O.S. (Autokum Putillates) D001,F001 Flammable Liquid, UN1993 (D001) F002,F003 DI 6 / 14000 ENNS J. Additional Descriptions for Materials Listed Above a)WMDS # 146142. Kolene. EMERGENCY RESPONSE INFORMATION: b)WMDS # 156468. Epoxy Pre-preg kevlar: (310) **533-**7926 Rob Tuell c)WMDS # 146135 Paint sludge (310) 830-1781 Tracy Takahash if no alternate TSDF, return to generator 15. Special Handling Instructions and Additional Information d)WMDS # 142764. Mixed waste solvents. In case of accident contact Chemtrec at 800-424-9300. Weights are approximate. Load # 68869. Appt Time 0900 on 2/13/92. DT ERG #5 9 1561M GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and Arkansas state regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volumn and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford. Month Day Year Printed/Typed Name 17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name Month Day Year ECTOR 10 121/109R 18. Transporter 2 Acknowledgement of Receipt of Materials Month Day Printed/Typed Name Signature 19. Discrepancy Indication Space 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name Signature Month Day PHANIE

EPA Form 8700-22 (Rev. 9-88) Previous edition is obsolete.

NOTICE: THE ORIGINAL AND NOT LESS THAN TWO (2) COPIES MUST MOVE WITH THE HAZARDOUS WASTE SHIPMENT. ONCE DELIVERED, THE TREAT-MENT/STORAGE/DISPOSAL FACILITY MUST RETURN THIS ORIGINAL COPY TO THE GENERATOR.

The Hazardous visits manifest is designed to racis waste from the point of generation to final disposal (crade to grave), in order to accomplish this goal, it is essential that all items on the manifest be completed correctly, incomplete or incorrect manifests are violations of the law, and could make you subject to civil or criminal triabilities as specified in the Federal Regulations and the Arkansas Hazardous Waster Management Costs.

INSTRUCTIONS—IMPORTANT:

State and Federal regulations require Generators, Transporters, and Treatment, Storage & Disposal Facilities (TSDFs) to use this form and if necessary the continuation sheet for both inter and intrastate shipments. (Continuation sheets are not

train sheet of both inter and intrastate simplifiers. (Continuation sheets are not provided by the state of Arkansas.)

The Arkansas Manifest contains 6 copies. AT COPIES MUST BE LEGIBLE. This form is designed for use on a 12 pitch (eilte) typewriter; a firmiball point pen may also be used only if you press down HARD. The 6 copies must be distributed in the following.way:

OFIGINAL: GENERATOR COPY-The TSDF will mail back to the generator state where

the waste was generated. (WHITE COPY):
STATE COPY—The in-state TSDF mails to Arkansas Department of Pollu-CODY 9-TSDF.COPY—TSDF keeps this copy for his records. (PINK COPY)

COPY

2ND TRANSPORTER COPY-The second transporter keeps for his re-COPY 4:

cords. (GOLD COPY)--1ST TRANSPORTER COPY—The first transporter keeps for his records. COPY 5:

(GREEN COPY) COPY 6: GENERATOR INTIAL COPY - The generator keeps once first transport-

er signs off and takes waste. (BLUE COPY)

IF THE TSDF IS LOCKTED OUT OF BLATE THE IN-STATE GENERATOR MUST SEND A PHOTOCOPY TO THE ARKANSAS DEPARTMENT OF POLLUTION CONTROL ONCE THE MANIFEST HAS BEEN SIGNED OFF BY THE ISDE

MARKEST YORM ACQUISITION

- If the destination (consignment) state supplies a manifest and requires its use, then the generator is obligated to obtain the manifest from that state. 1.
- If the destination state does not supply the mainfest, but the generator state does, then the generator is obligated to obtain the manifest form from the generator state
- If forms are unavailable from either state the generator may obtain a manifest from any source.

ARKANSAS WILL NOT ACCEPT THE GENERIC UNIFORM MANIFEST

SENERGIOR SECTION

GENERATOR'S US EPA ID NO.—MANIFEST DOCUMENT NO.—Enter the generator's 12 digit EPA identification number. The manifest document number is a unique 5-digit no: the generator assigns to each manifest. PAGE 1 Of _ Enter the total number of pages used to complete this manifest ite, the first page plus the number of continuation sheets, if item 1: Item 2:

GENERATOR'S NAME & MAILING ADDRESS-Enter the name and Item 3:

mailing address of the generator, and provide the site address. (1) A GENERATOR'S PHONE NUMBER—Enter a telephone no: witharea code Item 4: where an authorized agent of the generator can be reached in case of

I COMPANY NAME-Enter the company name (as no-• A) of the first transporter who will transport the waste.
• D NUMBER-Enter the US EPA 12-digit ID number of the first

tra potentied in tem 6.
TPAN SCOR EF 2. COMPANY NAME—If applicable, enter the company name (as notified to EPA) of the second transporter who will transport and transporter will be used, use a continuation sheet and list the transporters in the order they will be transporting the

den

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US EP 30 NUMBER-If applicable, enter the US EPA 12-digit ID number of the second transporter identified in Item 7.
DESIGNATED FACILITY NAME & SITE ADDRESS—Enter the company name and site address of the treatment, storage, disposal facility (TSDF) as the set on receive the waste listed on this manifest.
US DESIGNATED FACILITY NAME & SITE ADDRESS—Enter the 12-digit US EPA identification number as the designated SEPF listed in Item 9.
US DO DESCRIPTION—All of the following must be entered: the correct US DO TESCRIPTION—All of the following must be entered: the correct US DO TESCRIPTION—All of the following must be entered: the correct US DO TESCRIPTION—All of the following must be entered: the correct US DO TESCRIPTION—All of the INVA ID Number Test waster satisfied acid, spent corrosive material. UNINA ID Number Test waster must expert as part of the DOT name. If more than 4 waster are being shipped, a second manifest or continuation sheets must be used.

[Geo 49 OFR 172.201] Irem #11

Item 12: CONTRINERS (NO. & TYPE)—Enter the number of containers for each waste and the oppropriate abbreviations from Table 1 (below) for the type of containers used; ___

TABLE 1 CONTAINER TYPES

-Metal drums, barrels, kegs -Wooden drums, barrels, kegs -Fiberboard or plastic drums, barrels, kegs DF

-Tanks portable -Cargo tanks (tank trucks) -Tank cars

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-Metal boxes, cartons, cases (including roll-offs)
-wooden boxes, cartons, cases
-Fiber or plastic boxes, cartons, cases
-Burlap; cloth, paper or plastic bags

Item 13: TOTAL QUANTITY—Enter the total quantity of waste described of each Time Island J 256

DO NOT USE FRACTIONS

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UNIT (Wt./Vol.)—Enter the appropriate abbreviation from Table 2 (below) for the unit of measure used in determining the total quantity of waste described of mean line. described of each line.

UNITS OF MEASURE

Gallons (liquid only) -Pounds

Tons (2,000 lbs.) Cubic yards

-Liters (liquids only) -Kilograms -Metric Tons (1,000 kg)

N -Cubic meters SPECIAL HANDLING INSTRUCTIONS & ADDITIONAL INFORMATION-

Item 15: Use this space to indicate special transportation, treatment, storage, disposal, or Bill of Lading information. If any alternate facility is designated, note if here. For INTERNATIONAL SHIPMENTS, generators must enter the point of departure (city & state) in this space.

GENERATOR'S CERTIFICATION—The Generator must gread, sign, (by

Item 16: hand), and date the certification. If a mode other than highway is used, the word "nighway" should be lined out and the appropriate mode (rail, water, air) inserted in the space. If another mode in addition to the highway mode is used, enter the appropriate additional mode in the

space.

STATE MANIFEST DOCUMENT NUMBER—Number preprinted by the state of Arkansas except on the continuation sheets. Enter this number on each continuation sheet attached to the manifest.

STATE GENERATOR: 10—Are numbers issued by, state of Arkansas (i.e., PCB, Provisional, or Conditionally Exempt Generator Numbers).

STATE TRAN #1: 1D—Must have Arkansas Permit Number if transporting waste in, through, or out of Arkansas.

TRANSPORTER PHONE—Enter a telephone number with area code where an authorized agent of the transporter can be reached.

STATE TRAN #2: 1D—If applicable, enter Arkansas Permit Number if carrying waste in, through, or out of the Arkansas.

TRANSPORTER PHONE—If applicable, enter a telephone number with area code where an authorized agent of the second transporter may be reached. STATE MANIFEST DOCUMENT NUMBER-Number preprinted by the

Item B:

Item D

Item E: Item F:

Item G: Item H:

Item I:

Item J:

reached.
STATE FACILITY'S ID—No entry is required by Arkansas.
FACILITY PHONE—Enter a telephone number with area code of the TSDF designated to receive the waste listed on the manifest.
WASTE NO.—Enter the 4-digit EPA Hazardous Waste No. as listed in 40 Code of Federal Regulations Part 261.
ADDITIONAL DESCRIPTIONS FOR MATERIALS LISTED BELOW—List additional description of material and alternate TSDF including TSDF. Address and EPA ID Number.
EMERGENCY RESPONSE INFORMATION—Arkansas requires the generator to list an authorized representative name and 24 hour phone number in case of an emergency. Item K:

TRANSPORTER SECTION

TRANSPORTER, 1 ACKNOWLEDGEMENT—Print or type the name of the person accepting the waste on behalf of the first transporter. That person must acknowledge acceptance of the waste described on the manifest by signing and entering the date of receipt.

TRANSPORTER 2 ACKNOWLEDGEMENT—If applicable, follow instructions for item 17 for the second transporter. Item 17:

₹; Item 18;

ALL HAZARDOUS WASTE TRANSPORTERS OPERATING IN ARKANSAS MUST HAVE A VALID ARKANSAS TRANSPORTER PERMIT. Note:

DESIGNATED FACILITY (TSDF) SECTION

DISCREPANCY INDICATION SPACE—The authorized representative of the designated facility must note in this space any significant disorepancy between the waste described on the manifest and the waste actually received at the facility. Any rejected materials should be listed here, along with an explanation of the disposition of the rejected wastes. FACILITY OWNER/OPERATOR CERTIFICATION—Print or type the name of the person accepting the waste on behalf of the owner/operator of the designated TSDF. That person must acknowledge acceptance of the waste described on the manifest by signing and entering the date. Item 19: Item 20:

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For interstate shipments you may be required to comply with the manifesting requirements of both the receiving and generator states regarding the completion of specific information included in lettergot the A-K-Please check with both generator and disposer states for specific requirements.

BURDEN DISCLOSURE STATEMENT

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators 15 minutes for transporters, and 10 minutes for treatment, storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to: Chief, information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M Street, S.W., Washington, D.C., 20460; and to the Office of Information and Regulatory Affairs, Office Of Management and Budget, Washington; D.C., 20503.

Note:

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STATE OF ARKANSAS

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P. O. Box 8913 Little Rock, Arkansas 72219-8913

Telephone 501-562-7444

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(Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91 Information in the shaded areas is not **UNIFORM HAZARDOUS** CIAID 10 18 16 15 11 10 10 10 15 17 20 mm 1/19 required by Federal law. WASTE MANIFEST 3. Generator's Name and Mailing Address
Douglas Aircraft Company Attn: R. Tuell M/S C6-59 A. State Manif 19503 S. Normandie Avenue, Torrance, CA 90502 Generator's Phone (310 >533-7926 or (310) 533-7231 HAH036005698 5. Transporter 1 Company Name
United Pumping Service 7. Transporter 2 Company Name F. Transporter's Phone 9. Designated Facility Name and Site Address Ensco, Inc. American 011 Road H. Facility's Phone El Dorado, AR 71730 A R D O 6 9 7 4 8 1 9 2 (501) 863-7173 14. Unit Wt/Vol 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) Quantity Waste No. Type aRQ, Waste, Oxidizer, Corrosive Solid, N.O.S. (Potassium Nitrate, Potassium Hydroxide) Oxidizer, NA9194 (D001, D002) Non-RCRA Hazardous Waste Solid N/R · RQ, Waste, Paint Related Material 0001,F002 Flammable Liquid, NA1263 (D001) F003.F005 d RQ. Waste, Flammable Liquid, N.O.S. (Petiology Pittillates) D001,F001 Flammable Liquid, UN1993 (D001) F002, F003 Additional Descriptions for Materials Listed Above

a) WMDS # 146142. Kolene. b)WMDS # 156468. Epoxy Pre-preg kevlar. (310) 533-7926 Rob Tuell C)WMDS # 146135. Paint sludge. 310) 830-1781 Tracy Takahash if no alternate TSDF, return to generator 15. Special Handling Instructions and Additional Information d)WMDS # 142764. Mixed waste solvents. In case of accident contact Chemtrec at 800-424-9300. Weights are approximate. Load # 68869. Appt Time 0900 on 2/13/92. 207 ERG # 5 GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and Arkansas state regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volumn and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford. Printed/Typed Name Robert 40 17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name HECTOR 18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name Sianature Month Day 19. Discrepancy Indication Space 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name Month Day EPA Form 8700-22 (Rev. 9-88) Previous edition is obsolete.



UNITED UNITED PUMPING SERVICE, INC. 24235 FIELD WORK ORDER

14016 EAST VALLEY BOULEVARD CITY OF INDUSTRY, CALIFORNIA 91746 PHONE: (818) 961-9326

FAX (818) 336-7734								7	OF	
CUSTOMER/ADDRESS DOUGLAS AIRCRAFY COMP, DATE WORK PERFORMED. DZ-10-92 DATE OF THIS REPORT:										
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ADDITIONAL INFORMATION:					,			```		

CUSTOMER COPY

A		JNIFORM HAZARDOUS WASTE MANIFEST (Continuation Sheet)	21. Generator's US EPA ID No. CAD086510005	Manifest Docu	iment No	22. Page 2 of 2	areas is		ne shaded uired by Federal
1		Generator's Name Douglas Aircra				L. State M AR53	anifest Doci		Number
						HAHQ	ienerator's l 3600569	8	
		Transporter 1 Company Name		JS EPA ID Numb	er	N. State T	ransporter's	[™] PC1	123 H602
		United Pumping Servi Transporter Company Name		IS EPA ID Numb	er	O. I ransp	orter's Phon ransporter's	e (212	8)961 - 9326
				o an i tio manio	J.	2.67 (10)	orter's Phon		
	<u> </u>	. US DOT Description (Including Pi	roper Shipping Name, Hazard Class, ar	nd ID Number)	29. Conta No.	i I	30. Total Quantity	31. Unit Wt/Vol	R. Waste No.
	a.	(Petroleum Disti	nable Liquid, N.O.S. allates) I, UN1993 (DOO1)			D M		Р	D001
	b.		iste Solid, N.O.S. (Chro	omium)		DM		P	D007,D008
	C.	RQ, Waste, Compr Flammable Gas, U	ressed Gas, N.O.S. (Peti JN1954. (DOO1)	roleum Dis	tillat	es) DM		Р	D001,U159 U220,U239
3 E Z E E	d.	Rq, Hazardous Wa ORM-E, NA9189 (E	aste Solid, N.O.S. (111- 0007,D008)	-Trichloro	ethane) BA		P	D007,D008 F001,F005
A T O	e.								
	f.							-	
	g.			·					
	h.	h.							
	i.								
	S. Additional Descriptions for Materials Listed Above a) WMDS # 146152. Adhesives, overpacked. b) WMDS # 50091. Sealant tubes. c) WMDS # 142772. Aerosol cans. d) WMDS # 146134. Production rags cont. w/solvents. 32. Special Handling Instructions and Additional Information				s Listed Above				
			contact Chemtrec at 800-	-424-9300/					
4	33	Transporter Acknowledge	ment of Receipt of Materials						
		Printed/Typed Name	Signal	ature			·		Date Month Day Year
		Transporter Acknowledge	ement of Receipt of Materials				<u> </u>		Date
	F	Printed/Typed Name	Signa	ature	V-1999			į	Month Day Year
	35.	Discrepancy Indication Space							<u> </u>



STATE OF ARKANSAS Department of Pollution Control and Ecology P. O. Box 8913 Little Rock, Arkansas 72219-8913 Telephone 501-562-7444

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Ple	Please print or type. (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-9									
-	UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator's US EPA ID No. C A D 0 8 6 5		Manif Docume		2. Pag of	2	required	by Federa	shaded areas is not al law
	3. Generator's Name and Mailing Address Douglas Aircraft Company 19503 S. Normandie Avenue,					AR		533E		
	4. Generator's Phone (310) 533-7926	or (310) 533-7						005698		
	5. Transporter 1 Company Name United Pumping Service	6.	US EPA ID N	lumber		C. State	e Transpo	orter's ID	PC]	-123- H 602
	7. Transporter 2 Company Name	II	1 00 17 12 19 15 US EPAJDA	3 7	<u> 7 1 </u>	 	sporter's	Phone (8	•	61-9326
		1.1	1	1:17	I I		porter's		PC	H
	9. Designated Facility Name and Site Address	10.	US EPA ID N	lumber	L	G. State	e Facility	's ID		
	Ensco, Inc. American Oil Road						7. I. Dr.			
	El Dorado, AR 71730	IA In	<u> D 0 6 9 7 4</u>	lo la	lo lo	ł	ity's Pho		-	
	Add NO DOTTO		ID ID 16 19 17 14		2. Conta			363-71	14.	
	11. US DOT Description (Including Proper Shipping Name,				No.	Туре		Total uantity	Unit Wt/Vol	I. Waste No.
G E N E	^a RQ, Waste, Oxidizer, Corro (Potassium Nitrate, Potass	ium Hydroxide)								
R	Oxidizer, NA9194 (D001,D00	2)			<u> </u>	DJE			P	D001,D002
A T	Non-RCRA Hazardous Waste S	olid								
O R						DM			Р	N/R
	° RQ, Waste, Paint Related 1 Flammable Liquid, NA1263	daterial (D001)			1 1	D _I M	1	111		0001,F002 F003,F005
	d. RQ, Waste, Flammable Liqu	id, N.O.S.			<u> </u>					D001,F001
	Flammable Liquid, UN1993	(D001)				Di 6	1	1 1 1	P	F002,F003
	J. Additional Descriptions for Materials Listed Above				LL		dling Cod	les for Waste	s Listed A	F005
	a)WMDS # 146142. Kolene. b)WMDS # 156468. Epoxy Pre	nung kaulan						Y RESPON		
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	if no alternate TSDF, return to generator					(51	0, 0	30-170	, I I I I	icy rakanasii
	15. Special Handling Instructions and Additional Information									
	d)WMDS # 142764. Mixed was In case of accident contac		800_424_930	וח ווו	aiah:	tc a	ro a	nnvovi	mato	
	Load # 68869. Appt Time 09	900 on 2/13/92		26 :			15 d		,	60/27
	16. GENERATOR'S CERTIFICATION: I hereby dec	lare that the contents of the	nis consignment are f	ully and a	accurat	ely des	cribed	above by p	roper shi	ipping name and are
	classified, packed, marked, and labeled, and government regulations and Arkansas state reg	ulations.	•			•				·
	If I am a large quantity generator, I certify that I economically practicable and that I have select	ed the practicable method	of treatment, storage	, or dispo	osal cur	rently a	vailable	e to me whi	ch minim	izes the present and
	future threat to human health and the environm the best waste management method that is available.			e made a	a good	iaiiii eii		iiiiiiiiize iiiy	wasie g	eneration and select
V	Printed/Typed Name		Signature	6	7.	.1	0	2		Month Day Year
Ţ	Robert (1, Juel) 17. Transporter 1 Acknowledgement of Receipt of Materials	<u> </u>	14000		<u>~~</u>	ey		7) (0/2/1/0/2/2
T R A N S P O R T E R	Printed/Typed Name		Signature							Month Day Year
S P			<u> </u>							<u> </u>
O R T	 Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name 		Signature							Month Day Year
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I T Y	20. Facility Owner or Operator: Certification of receipt of haz	ardous materials covered by the	T	ted in Item	19.					
Y	Printed/Typed Name		Signature				-			Month Day Year



LAND DISPOSAL RESTRICTION NOTIFICATION FORM

SECTIONI	Manifest No.: ARS32657	
Generator Name: Duglas Aircraft Co	WMDS No.(s): 146142 1564657	46135, 14276 42772, 14604
Address: 19503 S. Normandie Aug	Completed By: Rob Tvell	
Torrance, CA 90002	Title: Senior Plant Engineer	<u></u>
USEPAID No.: CABOSES 10005	Date: 2/10/92	
(Continuation Sheets may be attached	and are numbered accordingly: Page of	_)
SECTION II SPENT SOLVENT WASTE (268.30)	AND CALIFORNIA LIST WASTE (268.32)	
	olvent Wastes (F001-F005)	
The shipment, as referenced by the above manifest Waste Code(s) FOO, FOO, FOO, FOOS The above referenced waste(s) must be treated to meet the Waste Extract as outlined in 40 CFR 268.41 Table (control of the control	et the treatment standard expressed as Constituent	
	able CCWE—Constituent centrations in Waste Extract	
	Concentration (in mg/l)	
	Wastewaters	Non-Wastewaters
F001-F005 Spent Solvents		
Acetone n-Butyl alcohol	0.05 5.0	0.59 5.0
Carbon disulfide	1.05	4.81
Carbon tetrachloride Chlorobenzene	.05 .15	.96 .05
Cresols (and cresylic acid)	2.82	.75
Cyclohexanone	.125 .65	.75 .125
1,2-Dichlorobenzene Ethyl acetate	.05	.75
Ethylbenzene	.05	.053
Ethyl ether	.05 5.0	.75 5.0
Isobutanol Methanol	.25	.75
Methylene chloride	.20	.96
Methylene chloride (from the pharmaceutical industry)	12.7	.96
Methyl ethyl ketone	0.05 0.05	0.75 0.33
Methyl isobutyl ketone Nitrobenzene	0.66	0.125
Pyridine	1.12	0.33
Tetrachloroethylene	0.079 1.12	0.05 0.33
Toluene	1.05	0.41
1,1,1-Trichloroethane 1,1,2-Trichloro-1,2,2-Trifluoroethane	1.05	0.96
Trichloroethylene	0.062	0.091
Trichlorofluoromethane	0.05 0.05	0.96 0.15
Xylene		J
Table CCW	-Constituent Concentrations in Waste	
1,1,2-Trichloroethane	0.030	7.80
Benzene	0.070	3.70
Methylene Chloride (Pharmaceutical Industry)	0.44	N/A
F005 Spent Solvents 2-Nitropropane and 2-Ethoxyethanol have treatment standar		
—If indicated by "X," any or all of the above specified "X" here, if applicable	d waste codes are referenced to Certification Statement S	ection VI.

•					
(Check Here)		B. California	a List Wastes		
This shipment, Code(s)	as referenced by the ab	ove manifest number,	contains waste(s) corre	sponding to USEPA H	azardous Waste
The above refe where specific	renced waste(s) must be treatment standards ar CFR 268.32 and RCRA	e not applicable, the			
			T CONSTITUENTS HIBITION LEVELS		
			CONCENT	RATION	
	C	ONSTITUENT	(MG/L	<u>-) </u>	
		Cyanides	1. The state of th	,000	
		Arsenic Cadmium		500 100	
		Chromium VI		500	
		ead		500	
		Mercury	ntoining Niekal	20 134	
		.iquid Hazardous Waste Co Selenium	maining Nicker	100	
		iquid Hazardous Waste Co	ntaining Thallium	130	
		iquids with pH ≤ 2.0	_	_	
		lazardous Waste Liquids v	vith PCBs 50	ppm ==0-=	
*Commodity time and b	ז " nazardous wastes containing a	lazardous Wastes containing	ng HOCs** 1,000 m	g/kg Imant standards which owns	roada tha California
List Prohibitions an effective date may	nd should be referenced in Sec be subject to these prohibition ganic Carbon (See 40 CFR Ap	tion III of this form. Howeve s if any of these constituent	r, liquid and solid hazardous v	vastes which are subject to a	an extension in the
"X" here,	ed by "X," any or all of the abo	ve specified waste codes a	re referenced to certification st	tatement Section VI.	
if applicable					
SECTION III		OTHER RESTR	ICTED WASTES		
	ste(s) contained in this sh tandards set forth in 268			no. are listed below a	nd are subject to
treatment code	e code, list the following for specified technolog based standards, if appl	y in 268.42, if applicat	ole (INCIN, DEACT, STA	ntability Group (NWW BL) or CFR Section ar	or WW); <u>5-letter</u> nd Paragraph for
		• • • • • • • • • • • • • • • • • • • •			
USEPA Hazardous Waste Code(s)	Subcategory, If Applicable*	Treatability Group	Treatment Technology (5-letter Treatment Code INCIN, DEACT, OR STABL)	CFR Section and Paragra or (268.41(a) and/or 268.43(a))	Waste Codes Indicat ph By "X" are Reference to Certification Statement Section
DOOL	Oxidizer	New	DEACT		
10001	Ignitable Liquid	Num	INKIN	· · · · · · · · · · · · · · · · · · ·	· ·
1000 ·	Alkalino Sold	Muc	DEACT		
12007		New		268,41(4)	
12008		New		268.41(4)	-
1001	Ignitable Gas	New	INCITY		
U159		Nun		268.48(=)	
VZZO		- Mul		268,43(9)	
U239		New		268.48(a)	
*Required for the	following waste codes: D001,	DOO2, DOO3, DOO6, DOO9	D009 K061 K069 K071 K1	~/	
Liedanea ioi me	iono iring masic codes. Door,	,,,,,,,	2000, 10001, 10000, 1001 1, 1011	20, 1 000, 1 00E and 0101.	



SECTION IV

LAB PACK CERTIFICATION

In accordance with 40 CFR 268.7(a)(7) and (8) and regarding Waste Code(s)	g those lab pack wastes corresponding to USEPA Hazardous
identified as restricted wastes contained in this shipment and certification statement(s) where applicable:	d referenced by the above manifest no., I submit the following
Appendix IV Lab Pack Wastes	Appendix V Lab Pack Wastes
(Organometallic)	(Organic)
I certify under penalty of law that I personally have examined and am familiar with the waste and that the lab pack contains only the wastes specified in Appendix IV to part 268 or solid wastes not subject to regulation under 40 CFR Part 261. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine or imprisonment.	I certify under penalty of law that I personally have examined and am familiar with the waste through analysis and testing or through knowledge of the waste and that the lab pack contains only organic wastes specified in Appendix V to Part 268 or solid wastes not subject to regulation under 40 CFR Part 261. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine or imprisonment.
Signature	Signature
TitleDate	TitleDate
	by EPA in Appendix IV or V are referenced in Section III of this
	NEXTENSION IN THE EFFECTIVE DATE pendix VII & VIII)
The wastes contained in this shipment as referenced by the Effective Date in accordance with 40 CFR Subpart C are iden	above manifest no. which are subject to an Extension in the ntified below:
USEPA Hazardous Waste Code/ Treatability Group (NWW or WW)	Extension Date
(These wastes may be subject to the California	List Prohibitions—See Section IIB of this form)
	STE WHICH MAY BE LAND DISPOSED HER TREATMENT
In accordance with 268.7(a)(2) and regarding those restricte land disposed without further treatment. I submit the following	d waste(s) contained in this shipment, these waste(s) may be g certification statement:
certification that the waste complies with the treatment standards specified in 40 CFR Pa	e waste through analysis and testing or through knowledge of the waste to support this rt 268 Subpart D and all applicable prohibitions set forth in 40 CFR 268.32 or RCRA section aware that there are significant penalties for submitting a false certification, including the
SignatureTitle	Date
(This certification is referenced to the appropriate US Sections II or III).	SEPA Hazardous Code(s) in the foregoing appropriate
Maria - Thomas - The Carlos - Maria -	the information contained havein is based upon my
waste analysis is attached where available, otherwise	e, the information contained herein is based upon my

I hereby certify that all information submitted in this document is complete and accurate to the best of my knowledge and information.

Signature & Robert S. Juelly, Title & Sr. Plant Engr. Date x 02-10-92

Rev. DA 10/90

